Substitute for form PTO/SB/08A	Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT	Application Number	09/940,141
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	First Named Inventor	Douglas Cheline
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Sheet 1 of 1	Attorney Docket Number	PD-201118

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Examiner Initials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volumne-issue number(s), publisher, city and/or country where published.	T
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Examiner Signature	/Peling Shaw/	Date Considered	03/05/2010

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /P.S./